FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

PURIN D

EIVED NOTICE OF SALES OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION



Prefix Serial

DATE RECEIVED

102 /6/	ý			
	nendment and name has chang	ed, and indicate c	hange.)	
Current Analysis Series D Convertible Pref	ferred Stock Offering			
Filing Under (Check box(es) that apply):	Rule 504 Rule 505	□ Rule 506	☐ Section 4(6) ☐ ULOE	
Type of Filing: ☐ New Filing ☐ Amenda	ment_			
	A. BASIC IDENTIFI	CATION DATA		
1. Enter the information requested about the is	ssuer			
Name of Issuer (check if this is an amer	ndment and name has changed,	and indicate cha	nge.)	
Current Analysis, Inc.				
Address of Executive Offices	(Number and Street, City,	State, Zip Code)	Telephone Number (Including Area	Code)
21335 Signal Hill Plaza, Second Floor, Sterli	ing, VA 20164		(703) 404-9200	
Address of Principal Business Operations	(Number and Street, City,	State, Zip Code)	Telephone Number (Including Area	Code)
(if different from Executive Offices)				
Brief Description of Business				
Corporate research and competitive business in	ntelligence gathering.			=aa~
				= C.C.
Type of Business Organization			IIIN 1 S	วกกร
□ corporation	☐ limited partnership, alre	eady formed	other (please specify).JUN 13)
☐ business trust	☐ limited partnership, to b	e formed	70.2030	g-nat
	Month	Year	FINAN	CIAL.
Actual or Estimated Date of Incorporation or C	Organization: 01	1997	□ Actual □ Estimated □	
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal S	ervice abbreviati	on for State:	
	CN for Canada; FN for other	foreign jurisdiction	on) DE	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		BASIC IDENTIFIC	ATION DATA		
2. Enter the information request					
 Each promoter of the issue 	•	•			
 Each beneficial owner have the issuer; 	ing the power to vote or	r dispose, or direct the	vote or disposition of, 1	0% or more of a c	lass of equity securities of
 Each executive officer and 	director of corporate is	ssuers and of corporate	general and managing	partners of partner	ship issuers; and
 Each general and managing 	g partner of partnership	issuers.			
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	□Director	☐General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Apex Investment Fund V, L.P.					
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	Signal Hill Plaza, Seco	ond Floor, Sterling, VA	. 20164		·
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
The Ocean Fund					
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	Signal Hill Plaza, Seco	ond Floor, Sterling, VA	20164		
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Tritech Partners, L.P.					
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	Signal Hill Plaza, Seco	ond Floor, Sterling, VA	20164		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
North Hill Ventures II, L.P.					·
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	Signal Hill Plaza, Seco	ond Floor, Sterling, VA	20164		
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Inflection Point Ventures, II, I	. . Р				
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	Signal Hill Plaza, Seco	ond Floor, Sterling, VA	20164		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
McClimans, Fred J.	·				
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	Signal Hill Plaza, Seco	ond Floor, Sterling, VA	20164		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; · Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. ☐General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Director Managing Partner Full Name (Last name first, if individual) Atwell & Company Business or Residence Address (Number and Street, City, State, Zip Code) c/o Current Analysis, Inc. 21335 Signal Hill Plaza, Second Floor, Sterling, VA 20164 ⊠ Beneficial Owner □ Executive Officer ☐ General and/or Check Box(es) that Apply: ☐ Promoter ☐ Director Managing Partner Full Name (Last name first, if individual) Apex Venture Holdings, LLC Business or Residence Address (Number and Street, City, State, Zip Code) c/o Current Analysis, Inc. 21335 Signal Hill Plaza, Second Floor, Sterling, VA 20164 Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Lanfri, William (Number and Street, City, State, Zip Code) Business or Residence Address c/o Current Analysis, Inc. 21335 Signal Hill Plaza, Second Floor, Sterling, VA 20164 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐General and/or Managing Partner Full Name (Last name first, if individual) Madsen, Pete Business or Residence Address (Number and Street, City, State, Zip Code) c/o Current Analysis, Inc. 21335 Signal Hill Plaza, Second Floor, Sterling, VA 20164 ☐ Beneficial Owner ☐ Executive Officer ☐General and/or Check Box(es) that Apply: Promoter □ Director Managing Partner Full Name (Last name first, if individual) Swartz, Jeffrey Business or Residence Address (Number and Street, City, State, Zip Code) c/o Current Analysis, Inc. 21335 Signal Hill Plaza, Second Floor, Sterling, VA 20164 ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Blair, Robert (Number and Street, City, State, Zip Code) Business or Residence Address

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

c/o Current Analysis, Inc. 21335 Signal Hill Plaza, Second Floor, Sterling, VA 20164

		A. BASIC IDENTIFIC	ATION DATA		
2. Enter the information request	ed for the following	:			
 Each promoter of the issue 	r, if the issuer has b	een organized within the p	ast five years;		
 Each beneficial owner hav the issuer; 	ing the power to vot	e or dispose, or direct the	vote or disposition of, 1	0% or more of a	class of equity securities of
 Each executive officer and 	director of corpora	te issuers and of corporate	general and managing	partners of partne	rship issuers; and
 Each general and managing 	g partner of partners	hip issuers.		-	•
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	☐General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Gilbert, Barry	,				
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	Signal Hill Plaza, S	Second Floor, Sterling, VA	20164		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Keneipp, Ray					
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	Signal Hill Plaza, S	Second Floor, Sterling, VA	20164		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in van Gorder, Thomas E.	dividual)				
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	Signal Hill Plaza, S	Second Floor, Sterling, VA	20164		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐General and/or Managing Partner
Full Name (Last name first, if in	idividual)				
Stevens, Alison				· .	
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	Signal Hill Plaza, S	Second Floor, Sterling, VA	20164		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐General and/or Managing Partner
Full Name (Last name first, if in	idividual)	- 			
Jacobson, Andrew J.					
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	Signal Hill Plaza, S	Second Floor, Sterling, VA	20164		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in Revis, Ken	idividual)			,	
Business or Residence Address	(Number and Stre	eet, City, State, Zip Code)			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

c/o Current Analysis, Inc. 21335 Signal Hill Plaza, Second Floor, Sterling, VA 20164

		A. BASIC IDENTIFIC	ATION DATA		
2. Enter the information request		-			
 Each promoter of the issue 	r, if the issuer has	been organized within the p	ast five years;		
 Each beneficial owner hav the issuer; 	ing the power to ve	ote or dispose, or direct the	vote or disposition of, 1	0% or more of a o	class of equity securities of
 Each executive officer and 	d director of corpor	rate issuers and of corporate	general and managing	partners of partne	rship issuers; and
 Each general and managing 	g partner of partne	rship issuers.			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠Director	☐General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Chow, Lon	•				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	•		20164		
Check Box(es) that Apply:	☐ Promoter		☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Kahn, Martin	,				
Business or Residence Address	(Number and St	reet, City, State, Zip Code)			· · · · · · · · · · · · · · · · · · ·
c/o Current Analysis, Inc. 21335			20164		
Check Box(es) that Apply:	☐ Promoter		☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if in Tietjen, Hugh M.	dividual)				
Business or Residence Address	(Number and St	reet, City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	Signal Hill Plaza,	, Second Floor, Sterling, VA	20164		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Davison, Jeffrey					
Business or Residence Address	(Number and St	reet, City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	Signal Hill Plaza,	, Second Floor, Sterling, VA	20164		
Check Box(es) that Apply:	☐ Promoter		☐ Executive Officer	☐ Director	☐General and/or Managing Partner
Full Name (Last name first, if in	ndividual)				
Business or Residence Address	(Number and St	reet, City, State, Zip Code)			
c/o Current Analysis, Inc. 21335	5 Signal Hill Plaza,	, Second Floor, Sterling, VA	20164		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

☐ Beneficial Owner ☐ Executive Officer ☐ Director

☐ General and/or Managing Partner

Check Box(es) that Apply:

Business or Residence Address

Full Name (Last name first, if individual)

☐ Promoter

(Number and Street, City, State, Zip Code)

					В.	INFOR	MATION	ABOUT	OFFERI	NG					··········
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1.	Has the	issuer sol	d, or does							_		•••••	••••••		\boxtimes
2.	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?										\$24.40				
										Yes	No				
3.										\boxtimes					
4.	. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person														
	to be lis	sted is an a	ssociated	person or	agent of a	broker or	dealer reg	gistered wi	th the SEC	and/or w	ith a state	or states,	list the		
		f the broke forth the						ted are ass	ociated pe	rsons of s	uch a brol	er or deal	er, you		
Full		ast name f			DIOREI OI	dealer on	у.								
	`		,												
Duci	200 OF D	esidence A	Admoss	(Number	and Street	t, City, Sta	to Zin Co				_ _				
Dusii	iless of K	esidence A	Address	(Nullioei	and stree	i, City, Sta	ne, zip Co	ode)							
															
Nam	e of Asso	ociated Bro	oker or De	ealer											
						_									
State	s in Whi	ch Person	Listed Ha	s Solicited	or Intend	s to Solici	t Purchase	ers —							
	•	"All State												☐ All	States
	[AL] [IL]	[AK] [IN]	[AZ] [lA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full	Name (L	ast name f	irst, if ind	ividual)											
Busi	ness or R	esidence A	Address	(Number	and Stree	t, City, Sta	ate, Zip Co	ode)							
Nam	e of Asso	ociated Bro	ker or De	ealer	·									·	
- Ctt-		-1 D	T 1-4- 1 TT-	- C - 11 - 14	1 T - 4 3	S- 4- C-11-1	. D 1								
State		ch Person "All State												□ A1	l States
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	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
Full		ast name f			[1/1]	[01]	[4 1]	[VA]	[₩٨]	[,,,]	[111]	[** 1]	[IK]		
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Busi	ness or K	tesidence A	Address	(Number	and Stree	t, City, Sta	ate, Zip Co	ode)							
						· · · · · · · · · · · · · · · · · · ·									
Nam	e of Asso	ociated Bro	oker or De	ealer											
State	s in Whi	ch Person	Listed Ha	s Solicited	or Intend	ls to Solici	it Purchase	ers							*
	(Check	"All State	s" or chec	k individu	ial States)					•••••			•••••	□ A1	l States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
	[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
	[RI]	(SC)	[SD]	[TN]	[TX]	IUTI	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]		

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		·		
	Type of Security Debt	•	Aggregate Offering Price	•	Amount Already Sold
		\$		\$	
	Equity	\$	7,470,162.55	\$	7,470,162.55
	☐ Common ☒ Preferred				
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests	\$		\$	
	Other (Specify:)	\$		\$	
	Total	\$	7,470,162.55	\$	7,470,162.55
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
			Number Investors		Dollar Amount of Purchases
	Accredited Investors		17	\$	7,470,162.55
	Non-accredited Investors	_	0	\$	7,470,102.33
	Total (for filings under Rule 504 only)	_		\$	
	Answer also in Appendix, Column 4, if filing under ULOE.			Ψ	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		T. 6		.
	Type of Offering		Type of Security		Dollar Amount Sold
	Rule 505		Security	\$	5014
	Regulation A	_		\$	
	Rule 504	_		\$	
	Total	_		\$	0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			•	
	Transfer Agent's Fees	• • • • •		\$	
	Printing and Engraving Costs	••••		\$	
	Legal Fees		🗵	\$	75,000
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify)	<i>.</i>		\$	
	Total				75,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES A	AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate of Part C - Question 1 and total expenses furnished This difference is the "adjusted gross proceeds to	in response to Part C - Question 4.a.		\$_	7,395,162.5
5.	Indicate below the amount of the adjusted gross in to be used for each of the purposes shown. If the furnish an estimate and check the box to the left payments listed must equal the adjusted gross processing to Part C - Question 4.b above.	e amount for any purpose is not known, of the estimate. The total of the			
			Paymer Office Directo Affilia	ers, rs, &	Payments To Others
	Salaries and fees		□ \$		\$
	Purchase of real estate		□\$		\$
	Purchase, rental or leasing and installation of ma	chinery and equipment	□\$		\$
	Construction or leasing of plant buildings and fac-	cilities	□ \$		\$
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass pursuant to a merger)	ets or securities of another issuer			\$
	Repayment of indebtedness				
	Working capital				
	Other (specify):		□\$ □\$		
			 \$		<u></u>
	Column Totals			0 🗵	·
	Total Payments Listed (column totals added)			\$7,395,162.55	
		D. FEDERAL SIGNATURE			
sign	issuer has duly caused this notice to be signed by thature constitutes an undertaking by the issuer to furn mation furnished by the issuer to any non-accredite	nish to the U.S. Securities and Exchange	Commission,		
Issu	er (Print or Type)	Signature		Date	
<i></i>	rent Analysis, Inc.	Mon		June &	3 , 2005
	e of Signer (Print or Type) ey L. Swartz	Title of Signer (Print or Type) President and Chief Executive Officer			·
		ATTENTION			
	Intentional misstatements or omission		al violations	s. (See 18 U.S.C.	1001.)